

**REDACTED FOR PUBLIC INSPECTION**  
**FARMERS TELEPHONE COOPERATIVE INC (FTC)**  
**LIFELINE INITIAL ENROLLMENT FORM**

Lifeline is a federal benefit that makes monthly telephone service more affordable for eligible households. Your household may receive Lifeline on **one wireless OR one home telephone, but not both**. Your household may not receive the Lifeline benefit from more than one telephone company. For the purpose of Lifeline, a household is an individual or any group of individuals who live together at the same address and share income or expenses. You may not transfer your Lifeline discount to another person, even if he or she is eligible. You may lose your Lifeline benefit and may be prosecuted by the United States government if you violate the one-per-household rule or otherwise make false statements to receive Lifeline.

*Please complete the form below. You must give proof of eligibility with your application. Send the completed form and proof of eligibility to: Farmers Telephone Cooperative Inc. (FTC), 1101 E Main Street, Kingstree, SC 29556.*

Applicant Name _____		Phone Number _____																	
Email Address _____	Last 4 Digits of SSN _____	Date of Birth _____																	
Home Address																			
Street _____	Apt. _____	City _____	State _____ Zip Code _____																
Is your home address permanent? <input type="checkbox"/> YES <input type="checkbox"/> NO																			
Billing Address (If applicable)																			
Street _____	Apt. _____	City _____	State _____ Zip Code _____																
Person Eligible for Lifeline if Different than Applicant _____		Relationship to Applicant _____																	
Initial here	I give Farmers Telephone Inc. (FTC) permission to give my name, telephone number, and address to the Universal Service Administrative Company (USAC) or its agent to confirm that my household only receives one Lifeline benefit. If USAC finds that my household receives more than one Lifeline benefit, USAC will notify the telephone companies, and I will have to select one service and I will be de-enrolled from the other.																		
<b>Check the appropriate statement</b>																			
<input type="checkbox"/> I certify that I, my dependent, or someone else in my household receives assistance from at least one of the programs listed below and that I have provided proof of eligibility with my application. <i>(Please check all that apply)</i>																			
<input type="checkbox"/> Federal Public Housing Assistance/Section 8 <input type="checkbox"/> Low Income Home Energy Assistance (LIHEAP) <input type="checkbox"/> Medicaid <input type="checkbox"/> National School Lunch free lunch program <input type="checkbox"/> Supplemental Security Income (SSI) <input type="checkbox"/> Supplemental Nutrition Assistance Program (Food Stamps) <input type="checkbox"/> Temporary Assistance for Needy Families (TANF)																			
<b>OR</b>																			
<input type="checkbox"/> I certify that my household income is at or below 135% of the Federal Poverty Guidelines		<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Household Size</th> <th>Total Income</th> <th>Household Size</th> <th>Total Income</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>\$15,755</td> <td>3</td> <td>\$26,717</td> </tr> <tr> <td>2</td> <td>\$21,236</td> <td>4</td> <td>\$32,198</td> </tr> <tr> <td colspan="4">Add \$5,481 for each additional person</td> </tr> </tbody> </table>		Household Size	Total Income	Household Size	Total Income	1	\$15,755	3	\$26,717	2	\$21,236	4	\$32,198	Add \$5,481 for each additional person			
Household Size	Total Income	Household Size	Total Income																
1	\$15,755	3	\$26,717																
2	\$21,236	4	\$32,198																
Add \$5,481 for each additional person																			
Number of people in your household <span style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; vertical-align: middle;"></span>																			
Initial each box	<b>I certify, under penalty of perjury, that:</b>																		
	My household receives only one Lifeline-supported service, and to the best of my knowledge, no one in my household receives Lifeline from another telephone company.																		
	I understand that I must notify Farmers Telephone Inc. (FTC) within 30 days: (1) if I move to a new address; (2) if I, or the eligible person in my household, stops participating in the qualifying program checked above, or if my household income exceeds 135% of the federal poverty guidelines; (3) if my household receives more than one Lifeline discounted telephone; or 4) if my household, for any reason, no longer meets the criteria to receive Lifeline support. I understand that I may be penalized for failing to make the above notifications.																		
	I understand that I must recertify my Lifeline eligibility every year and that I will lose my Lifeline benefit if I do not recertify each year.																		
<b>By signing below, I certify under penalty of perjury, that the above information is true to the best of my knowledge. I understand that Lifeline is a government program and I may be punished if I knowingly provide false or untrue information to receive Lifeline. Punishment may include being fined, imprisoned, or barred from the Lifeline program.</b>																			
Signature _____		Date _____																	



REDACTED FOR PUBLIC INSPECTION  
Farmers Telephone Cooperative Inc (FTC)  
Lifeline Household Worksheet

Name	
Address	
Telephone Number	

Lifeline is a government program that provides a monthly discount on home or mobile telephone services. Only ONE Lifeline discount is allowed per household. Members of a household are not permitted to receive Lifeline service from multiple telephone companies.

Your **household** is everyone who lives together at your address as one economic unit (including children and people who are not related to you).

The **adults** you live with are part of your **economic unit** if they contribute to and share in the income and expenses of the household. An **adult** is any person 18 years of age or older, or an emancipated minor (a person under age 18 who is legally considered to be an adult). Household **expenses** include food, health care expenses (such as medical bills) and the cost of renting or paying a mortgage on your place of residence (a house or apartment, for example) and utilities (including water, heat and electricity). **Income** includes salary, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

Spouses and domestic partners are considered to be part of the same household. Children under the age of 18 living with their parents or guardians are considered to be part of the same household as their parents or guardians. If an adult has no income, or minimal income, and lives with someone who provides financial support to that adult, both people are considered part of the same household.

**You have been asked to complete this Worksheet because someone else currently receives a Lifeline-supported service at your address. This other person may or may not be a part of your household. Answer the questions below to determine whether there is more than one household residing at your address.**

1. Does your spouse or domestic partner (that is, someone you are married to or in a relationship with) already receive a Lifeline-discounted phone? (check no if you do not have a spouse or partner) ☐ YES ☐ NO
  - If you checked YES, you may not sign up for Lifeline because someone in your household already receives Lifeline. Only ONE Lifeline discount is allowed per household.
  - If you checked NO, please answer question #2.
2. Other than a spouse or partner, do other adults (people over the age of 18 or emancipated minors) live with you at your address?

A. A parent <input type="checkbox"/> YES <input type="checkbox"/> NO	D. An adult roommate <input type="checkbox"/> YES <input type="checkbox"/> NO
B. An adult son or daughter <input type="checkbox"/> YES <input type="checkbox"/> NO	E. Other <input type="checkbox"/> YES <input type="checkbox"/> NO
C. Another adult relative (such as a sibling, aunt, cousin, grandparent, grandchild, etc.) <input type="checkbox"/> YES <input type="checkbox"/> NO	

  - If you checked NO for each statement above, you do not need to answer the remaining questions. Please initial line B, below, and sign and date the worksheet.
  - If you checked YES, please answer question #3.
3. Do you share living expenses (bills, food, etc.) and share income (either your income, the other person's income or both incomes together) with at least one of the adults listed above in question #2? ☐ YES ☐ NO
  - If you checked NO, then your address includes **more than one household**. Please initial lines A and B below, and sign and date the worksheet.
  - If you checked YES, then your address includes only **one household**. You may not sign up for Lifeline because someone in your household already receives Lifeline.

**CERTIFICATION**

Please initial the certifications below and sign and date this worksheet. Submit this worksheet to Farmers Telephone Cooperative Inc (FTC) along with your Lifeline application.

- |  |  |
|--|--|
| A. <input type="checkbox"/> I certify that I live at an address occupied by multiple households. | B. <input type="checkbox"/> I understand that violation of the one-per-household requirement is against the Federal Communication Commission's rules and may result in me losing my Lifeline benefits, and potentially, prosecution by the United States government. |
|--|--|

Signature _____	Date _____
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FARMERS TELEPHONE  
COOPERATIVE, INC.

GENERAL SUBSCRIBER SERVICE TARIFF

ISSUED: April 30, 2013

Second Revised Page 1

BY: Sandra Moore

External Affairs/Regulatory Analyst

EFFECTIVE: June 1, 2013

A3.BASIC LOCAL EXCHANGE SERVICE

A3.1 General

The rates for basic local exchange service quoted herein are those authorized individually by the South Carolina Public Service Commission.

Base Rate Areas and Exchange Service Areas for each exchange are identified on maps filed as a supplement to this Tariff.

The rates for service and equipment not specifically shown in this section are presented in other sections of this Tariff.

A3.2 Monthly Exchange Rates

A. Monthly exchange rates as authorized by the South Carolina Public Service Commission are shown below.

A3.2.1 Flat Rate Service

A. The rates specified herein, with base rate are charges when applicable to service furnished outside the base rate area of exchange, entitle subscribers to an unlimited number of messages to all stations within the serving exchange and additional exchanges as shown in Section A3.3 of this Tariff.

EXCHANGE	RESIDENCE	BUSINESS	PTAS	
BISHOPVILLE RURAL	\$15.62	\$28.70	\$28.70	(C)
EAST SUMTER	\$15.62	\$28.70	\$28.70	(C)
GREELEVILLE	\$15.62	\$28.70	\$28.70	(C)
LANE	\$15.62	\$28.70	\$28.70	(C)
LYNCHBURG	\$15.62	\$28.70	\$28.70	(C)
MAYESVILLE	\$15.62	\$28.70	\$28.70	(C)
NORTH KINGSTREE	\$15.62	\$28.70	\$28.70	(C)
NORTH MANNING	\$15.62	\$28.70	\$28.70	(C)
NORTH SUMMERTON	\$15.62	\$28.70	\$28.70	(C)
NORTH SUMTER	\$15.62	\$28.70	\$28.70	(C)
OAKLAND	\$15.62	\$28.70	\$28.70	(C)
PINEWOCK	\$15.62	\$28.70	\$28.70	(C)
POCALLA	\$15.62	\$28.70	\$28.70	(C)
SCRANTON	\$15.62	\$28.70	\$28.70	(C)
STATEBURG	\$15.62	\$28.70	\$28.70	(C)
TURBEVILLE	\$15.62	\$28.70	\$28.70	(C)
WEST ANDREWS	\$15.62	\$28.70	\$28.70	(C)

FARMERS TELEPHONE  
COOPERATIVE, INC.  
ISSUED: December 8, 1989  
BY: Willie McCutchen

GENERAL SUBSCRIBER SERVICE TARIFF

First Revised Page 2  
Cancels Original Page 2  
EFFECTIVE: December 8, 1989

A3.BASIC LOCAL EXCHANGE SERVICE

A3.3 Local Calling Areas

The rates specified in Section A3.2.1(a) entitle subscribers to access all stations of the additional exchanges as shown below. The local calling area of the exchange in the left hand column also includes the exchanges listed in the right hand column.

<u>EXCHANGE</u>	<u>ADDITIONAL EXCHANGES</u>
BISHOPVILLE RURAL	Lynchburg-Bishopville Exchanges of General Telephone Company
GREELEYVILLE	Lane-North Kingstree-Kingstree Exchanges of General Telephone Company
LANE	Greeleyville-North Kingstree, Kingstree Exchanges of General Telephone Company
LYNCHBURG	Bishopville Rural-Mayesville, Bishopville Exchanges of General Telephone Company
MAYESVILLE	North Sumter, East Sumter, Oakland, Pineweed, Pocalla, Stateburg, Lynchburg, and General Telephone Company Exchanges of Shaw AFB, Shaw AFB Heights, and Sumter
NORTH KINGSTREE	Greeleyville, Lane, and Kingstree Exchanges of General Telephone Company
NORTH MANNING	North Summerton, Turbeville and Manning and Summerton Exchanges of General Telephone Company
NORTH SUMMERTON	North Manning, Manning and Summerton Exchanges of General Telephone Company
NORTH SUMTER	Mayesville, Oakland, Pinewood, Pocalla, Stateburg, East Sumter and the General Telephone Company Exchanges of Shaw AFB, Shaw AFB Heights, and Sumter
EAST SUMTER	Mayesville, Oakland, Pinewood, Pocalla, Stateburg, the General Telephone Company Exchanges of Shaw AFB, Shaw AFB Heights, Sumter, and North Sumter

FARMERS TELEPHONE  
COOPERATIVE, INC.  
ISSUED: June 28, 1979  
BY: Willie McCutchen  
Marketing Manager

GENERAL SUBSCRIBER SERVICE TARIFF

Original Page 3

EFFECTIVE: August 28, 1979

A3.BASIC LOCAL EXCHANGE SERVICE

A3.3 Local Calling Areas (cont.)

<u>EXCHANGE</u>	<u>ADDITIONAL EXCHANGES</u>
OAKLAND	Mayesville, North Sumter, East Sumter, Pinewood, Pocalla, Stateburg, and the General Telephone Company Exchanges of Shaw AFB, Shaw AFB Heights and Sumter
PINEWOOD	Mayesville, North Sumter, East Sumter, Oakland, Pocalla, Stateburg, and the General Telephone Company Exchanges of Shaw AFB, Shaw AFB Heights and Sumter
POCALLA	Mayesville, North Sumter, East Sumter, Oakland, Pinewood, Stateburg, and the General Exchanges of Shaw AFB, Shaw AFB Heights and Sumter
SCRANTON	Turbeville and the General Telephone Company Exchanges of Lake City, Olanta
STATEBURG	Mayesville, North Sumter, East Sumter, Oakland, Pinewood, Pocalla and the General Telephone Company Exchanges of Shaw AFB, Shaw AFB Heights, and Sumter
TURBEVILLE	North Manning, Scranton and the General Telephone Company Exchanges of Lake City, Olanta and Manning.
WEST ANDREWS	General Telephone Company Exchanges of Andrews and Georgetown

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**FARMERS TELEPHONE COOPERATIVE (SAC 240520)**

**ATTACHMENT - LINE 3017**

**ATTACHMENT REDACTED IN ENTIRETY**